

FRN

0001526086

Not Applicable

# Noncommercial Broadcast Stations Biennial Ownership Report (FCC Form 323-E)

**Entity Name** 

File Number: 0000047370Submit Date: 2018-03-02FRN: 0001526086Purpose: Noncommercial Broadcast Stations Biennial Ownership ReportStatus: ReceivedStatus Date: 03/02/2018Filing Status: ActiveStatusStatusStatus

### **Section I - General Information**

#### 1. Respondent

San Bernardino Community College District

Street Address	City (and Country if non U.S. address)	State ("NA" if non-U.S. address)	Zip Code	Phone	Email
701 South Mt. Vernon Avenue	San Bernardino	CA	92410	+1 (909) 384- 4336	kbirkfield@sbccd. cc.ca.us

#### 2. Contact Representative

Name	Organization
Michael R. Bennet, Esq.	Womble Bond Dickinson (US) LLP

Street Address	City (and Country if non U.S. address)	State	Zip Code	Phone	Email
1200 19th St., N.W. Suite 500	Washington	DC	20036	+1 (202) 857- 4442	michael.bennet@wbd-us. com

# 3. Application Filing Fee

# 4. Control of Respondent

(a) Provide the following information about the Respondent:					
Relationship to stations/permits	Licensee				
Is the Respondent's governing board (or other governing entity) directly or No indirectly under the control of another entity?					
(b) Provide the following information	(b) Provide the following information about this report:				
Purpose Biennial					
"As of" date 10/01/2017					
When filing a biennial ownership report or validating and resubmitting a prior biennial ownership report,					

filed.

date must be Oct. 1 of the year in which this report is

5. Licensee(s) and Station(s)

#### Respondent is filing this report to cover the following Licensee(s) and station(s):

Licensee/Permittee Name			FRN	
San Bernardino Community College District			000152608	36
Fac. ID No.	Call Sign	City	State	Service
58793	K201CD	VICTORVILLE	CA	FX
58794	KVCR	SAN BERNARDINO	СА	FM
58795	KVCR-DT	SAN BERNARDINO	CA	DTV
130845	KJHP-LP	MORONGO VALLEY	CA	LPD

#### Section II – Biennial Ownership Information

#### 1. 47 C.F.R. Section 73.3613 Documents

Licensee Respondents that hold authorizations for one or more full power television, AM, and/or FM stations should list all contracts and other instruments set forth in 47 C.F.R. Section 73.3613(a) through (c) for the facility or facilities listed on this report. If the agreement is a network affiliation agreement, check the appropriate box. Otherwise, select "Other." Non-Licensee Respondents should select "Not Applicable" in response to this question.

Document Information		
Description of contract or instrument	PBS Member Station Member Certification and Agreement	
Parties to contract or instrument	Public Broadcasting Service	
Date of execution	08/2017	
Date of expiration	06/2018	
Agreement type (check all that apply)	Network Affiliation Agreement	

Docu	ment	Informatio	n
DOCU	ment	mormatio	

Description of contract or instrument	PBS Uplink Services Agreement
Parties to contract or instrument	Public Broadcasting Service
Date of execution	07/2017
Date of expiration	06/2018
Agreement type (check all that apply)	Network Affiliation Agreement

#### 2. Ownership Interests

(a) Ownership Interests. This Question requires Respondents to enter detailed information about ownership interests by generating a series of subforms. Answer each question on each subform. The first subform listing should be for the Respondent itself. If the Respondent is not a natural person, also list each of the officers, members of the governing board (or other governing entity), stockholders, and any other persons or entities with a direct attributable interest in the Respondent pursuant to the standards set forth in 47 C.F.R. Section 73.3555. (A "direct" interest is one that is not held through any intervening companies or entities.) List each interest holder with a direct attributable interest in the Respondent separately.

Leave the percentage of total assets (Equity Debt Plus) field blank for an interest holder unless that interest holder has an attributable interest in the Respondent solely on the basis of the Commission's Equity Debt Plus attribution standard, 47 C.F.R. Section 73.3555, Note 2(i).

In the case of vertical or indirect ownership structures, list only those interests in the Respondent that also represent an attributable interest in the Licensee(s) for which the report is being submitted.

Entities that are part of an organizational structure that includes holding companies or other forms of indirect ownership must file separate ownership reports. In such a structure do not report, or file a separate report for, any interest holder that does not have an attributable interest in the Licensee(s) for which the report is being submitted.

Please see the Instructions for further detail concerning interests that must be reported in response to this question.

The Respondent must provide an FCC Registration Number for each interest holder reported in response to this question. Please see the Instructions for detailed information and guidance concerning this requirement.

Ownership Information			
0001526086			
San Bernardino Community College District			
on Avenue			
Respondent			
Respondent			
Interest holder is not a Tribal nation or Tribal entity			
0.0%			
0.0%			
	<b>ations</b> No		

Ownership Information		
FRN	9990130817	
Name	Joseph Williams	
Address	PO Box	
	Street 1	114 S. Del Rosa Dr.
	Street 2	
	City	San Bernardinao
	State ("NA" if non-U.S. address)	CA
	Zip/Postal Code	92408
	Country (if non-U.S. address)	United States

Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - President of the Board of Trustees; Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Founder and CEO of Youth Action Project		
By Whom Appointed or Elected	Elected by voters in the District		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations			

that do not appear on this report?

## Ownership Information

FRN	9990130840		
Name	Gloria Macias Harrison		
Address	PO Box		
	Street 1	114 S. Del Rosa Dr.	
	Street 2		
	City	San Bernardino	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	92408	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Other - Vice President of the Board of Trustees; Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Founder of El Chicano Newspaper		
By Whom Appointed or Elected	Elected by voters in the Distric	xt	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	

Interest Percentages (enter percentage values from 0.0 to 100.0)	Voting	14.3%	
	Equity	0.0%	
	Total assets (Equity Debt Plus)		
oes interest holder have an attributable interest in one or more broadcast stations			No

that do not appear on this report?

Ownership Information				
FRN	9990130844			
Name	Anne L. Viricel			
Address	PO Box			
	Street 1	114 S. Del Rosa Dr.		
	Street 2			
	City	San Bernardino		
	State ("NA" if non-U.S. address)	CA		
	Zip/Postal Code	92408		
	Country (if non-U.S. address)	United States		
Listing Type	Other Interest Holder			
<b>Positional Interests</b> (check all that apply)	Other - Clerk of the Board of Trustees; Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Educator	Educator		
By Whom Appointed or Elected	Elected by voters in the Distric	Elected by voters in the District		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Female		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages (enter percentage values	Voting	14.3%		
from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have	an attributable interest in one o	r more broadcast stations	No	

that do not appear on this report?

Ownership InformationFRN9990130845NameDonna FerraconeAddressPO BoxStreet 1114 S. Del Rosa Dr.

	Street 2		
	City	San Bernardino	
	State ("NA" if non-U.S. address)	СА	
	Zip/Postal Code	92408	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired Educator		
By Whom Appointed or Elected	Elected by voters in the District		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

#### **Ownership Information**

FRN	9990130847		
Name	John Longville		
Address	PO Box		
	Street 1	114 S. Del Rosa Dr.	
	Street 2		
	City	City San Bernardino	
	State ("NA" if non-U.S. CA   address) CA		
	Zip/Postal Code	92408	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired Educator		

By Whom Appointed or Elected	Elected by voters in the District		
Citizenship, Gender, Ethnicity, and Race Information (Natural Persons Only)	Citizenship	US	
	Gender	Male	
	Ethnicity	Not Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have an attributable interest in one or more broadcast stations No			No

Ownership Information			
FRN	9990130848		
Name	Frank Reyes		
Address	PO Box		
	Street 1	114 S. Del Rosa Dr.	
	Street 2		
	City	San Bernardino	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	92408	
Country (if non-U.S. Unite address)		United States	
Listing Type	Other Interest Holder	Other Interest Holder	
<b>Positional Interests</b> (check all that apply)	Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Retired Educator		
By Whom Appointed or Elected	Elected by voters in the Distric	t	
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	
Persons Only)	Ethnicity	Hispanic or Latino	
	Race	White	
Interest Percentages	Voting	14.3%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

that do not appear on this report?

Does interest holder have an attributable interest in one or more broadcast stations

Ownership Information				
FRN	9990130850			
Name	Donald Singer	Donald Singer		
Address	PO Box			
	Street 1	114 S. Del Rosa Dr.		
	Street 2			
	City	San Bernardino		
	State ("NA" if non-U.S. address)	СА		
	Zip/Postal Code	92408		
	Country (if non-U.S. United States   address) United States			
Listing Type	Other Interest Holder	Other Interest Holder		
Positional Interests (check all that apply)	Member of Governing Board (or other governing entity)			
Principal Profession or Occupation	Retired Educator			
By Whom Appointed or Elected	Elected by voters in the Distric	Elected by voters in the District		
Citizenship, Gender,	Citizenship	US		
Ethnicity, and Race Information (Natural	Gender	Male		
Persons Only)	Ethnicity	Not Hispanic or Latino		
	Race	White		
Interest Percentages	Voting	14.3%		
(enter percentage values from 0.0 to 100.0)	Equity	0.0%		
	Total assets (Equity Debt Plus)			
Does interest holder have a that do not appear on this r	an attributable interest in one o report?	r more broadcast stations No		

#### **Ownership Information**

<b>-</b>	•			
FRN	9990130851			
Name	Autumn Blackburn			
Address	PO Box			
	Street 1	114 S. Del Rosa Dr.		
	Street 2			
	City	San Bernardino		
	State ("NA" if non-U.S. address)	CA		

	Zip/Postal Code	92408	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
Positional Interests (check all that apply)	Other - Student Trustee; Me	Other - Student Trustee; Member of Governing Board (or other governing entity)	
Principal Profession or Occupation	Student		
By Whom Appointed or Elected	Elected by the student body		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Female	
Persons Only)	Ethnicity	Not Hispanic or Latino	
	Race	Black or African American	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		

Does interest holder have an attributable interest in one or more broadcast stations that do not appear on this report?

No

Ownership Information			
FRN	9990131255		
Name	Jajuan Dotson		
Address	PO Box		
	Street 1	114 S. Del Rosa Dr.	
	Street 2		
	City	San Bernardino	
	State ("NA" if non-U.S. address)	CA	
	Zip/Postal Code	92408	
	Country (if non-U.S. address)	United States	
Listing Type	Other Interest Holder		
<b>Positional Interests</b> (check all that apply)	Other - Student Trustee; Member of Governing Board (or other governing entity)		
Principal Profession or Occupation	Student		
By Whom Appointed or Elected	Elected by the student body		
Citizenship, Gender,	Citizenship	US	
Ethnicity, and Race Information (Natural	Gender	Male	

	Ethnicity Not Hispanic or Latino		
	Race	Black or African American	
Interest Percentages	Voting	0.0%	
(enter percentage values from 0.0 to 100.0)	Equity	0.0%	
	Total assets (Equity Debt Plus)		
Does interest holder have that do not appear on this	an attributable interest in one or report?	more broadcast stations	No
(b) respondent certifies t	hat any interests, including equit	y, manolal, or voling	Yes
interests, not reported in the lf "No," submit as an exhibit	this filing are non-attributable. an explanation.		
If "No," submit as an exhibit	an explanation.	y officer or director with	No

3. Organizational Chart (Licensees Only) Attach a flowchart or similar document showing the Licensee's vertical ownership structure including the Licensee and all entities that have attributable interests in the Licensee. Licensees with a single parent entity may provide a brief explanatory textual Exhibit in lieu of a flowchart or similar document. Licensees without parent entities should so indicate in a textual Exhibit.

Non-Licensee Respondents should select "N/A" in response to this question.

Licensee has no parent or subsidiary entities

### **Section III - Certification**

#### Certification

Section	Question	Response
Authorized Party to Sign	WILLFUL FALSE STATEMENTS ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (U.S. CODE, TITLE 18, SECTION 1001), AND /OR REVOCATION OF ANY STATION LICENSEOR CONSTRUCTION PERMIT (U.S. CODE, TITLE 47, SECTION 312(a)(1)), AND/OR FORFEITURE (U.S. CODE, TITLE 47, SECTION 503).	
Certification	I certify that I have examined this report and that to the best of my knowledge and belief, all statements in this report are true, correct and complete.	Official Title: <b>Vice Chancellor</b> Exact Legal Title or Name of Respondent: <b>San</b> <b>Bernardino Community College District</b> Name: <b>Jose F. Torres</b> Phone: <b>9093824021</b> 03/02/2018